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Reissman, Frank

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The first stage in a client-caseworker relationship begins with the initial interview and proceeds through the first four or five meetings. Lower class clients are more inclined to accept directive authority when it is combined with informal friendliness. Based on this assumption, several suggestions are presented to guide social workers in the first stage. First, encouraging the client to simply talk about his problems and feelings subjectively is preferred to having him answer questions on places, dates, background, and other details. A second suggestion is for the caseworker to talk about himself where relevant to the conversation. Third, minimum specific information which needs to be recorded should be taken down after the initial meeting at some later time. Finally the caseworker can offer whatever advice or services he anticipates might be needed in the improvement of client's problems.

A very different initial approach which should be explored is role-playing. Beginning on a one-to-one basis with the client and caseworker, role-playing furnishes an excellent transition to group sessions and family counseling. Role-playing has the potential advantages of reducing the distance between client and worker by participating together in dramatic situations, of lessening the negative consequences of a directive approach, and of providing an opportunity for client to express anger, hostility, and other emotions.

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Some Suggestions Concerning the "First Stage" in the Client-Caseworker Relationship

A number of features which characterize the first series of client interviews, in a casework setting might be experimentally altered with lower class clients in order to assess the value of a different approach:

1. The caseworker-client role relationship with its attendant formalism, role segmentation and non-humanistic separation;

2. The stress on obtaining and recording accurate, objective information (non-subjective) concerning the client's problem, background, situation, etc;

3. The emphasis on defining the agency's role, functions, rules, requirements, and mode of operation.

Instead of these emphases the following might be attempted:

I. A. The caseworker might simply encourage the client to talk about his problems and feelings subjectively, to express himself without regard to dates, places, details, information recording etc. (Much useful information might be obtained in this way, but this would not be the emphasis nor the goal);

B. The caseworker might talk about himself where relevant and possible (e.g. "I had a problem like that once." "I come from a neighborhood (family) like yours," "I have trouble making both ends meet;" or "A friend of mine has a situation a lot like yours.");

C. Whatever minimum specific information needs to be recorded could be taken down at the next meeting.

The worker can indicate that this recording of information is as unpleasant to him as it is to the client; he can share the lower class client's alienation toward impersonal bureaucratic procedure by indicating that "we have to do this--lets get it over with as easily as we can" (so that we can go back to really coming to grips with your problems);

D. The caseworker can provide whatever advice, service, anticipation of improvement that can be given at this stage.

In other words, "stage one," beginning with the initial interview and proceeding through the first four or five meetings, could be cathartic, supportive, informal and provide immediate service and appropriate advice. Every effort would be made to overcome role distance, impersonality and alienation. The assumption here is that lower class clients can accept directive authority when it is combined with informal friendliness.

II. Another very different initial approach might be explored. Role playing could be introduced at the very beginning, not on a group basis at first, but rather simply on a one to one basis where the case-worker and the client act out situations (parent-child problems, marital difficulties, vocational guidance problems of an interpersonal nature, etc.). Role playing might be utilized most profitably with young males (who are not receptive to "just talk") and also in family counseling. The one to one (caseworker and client) sessions could furnish an excellent transition to group sessions. The group sessions could be used diagnostically and also they could provide catharsis, support, problem objectification, problem sharing, and group solution. Frequently one lower class number has successfully dealt with (or is capable of dealing with) problems which are overpowering to another lower class individual. Sometimes the experience of people like himself is more influential than the caseworker's aid.

Role playing sessions also have other potential advantages that can be developed:

-- The caseworker (the "director") can participate in some of the situations thus immediately and dramatically reducing the distance between client and worker. (The caseworker will quickly be viewed as down to earth, funny, human);

-- The possible negative consequences stemming from the directive approach (which we feel is necessary in individual sessions) is greatly reduced as problem "solutions" are arrived at more communally;

-- The emotional dimension in role playing constrains toward more meaningfull insight and better carry through;

-- The client's anger, hostility and resistance to the worker can be much more easily expressed and worked with in role playing sessions than in individual confrontation.

/MF